diana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3. (GLROWERS) Date: 08/30/2007 Address: 6651E. C.P. 8005. Case #: 43 - 25/75 ELIZABETHTOWN, IN. County: BARTHOLONIEN Type of Laboratory Seizure (check one) Scizure Location (check all that apply) | | Operational Lab Residence ☐ Hotel/Motel 😾 Chernical/Glassware/Equipment (only) Outbuilding Open – No Structure ∏ Dumpsite (only) Vehicle Other: Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Lithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s): Flammable Solvents: ☐ Water Reactive Metal (Lithium): Anhydrous Ammonia: IN TANK AND BUCKET ALONG FENCE. Hydrochloric Acid Gas Generator(s): [| Corrosive Acid: Corrosive Base: Other (item and location):____ Child under age 18 discovered (check one) Investigative Information Yes ____ (number present) Ephodrine/Pseudocphodrine Tracking Log l**X**l No. Retail/Merchant Tip *If yes, fax report to Child Protective Services Other: This report is to be faxed to the following agencies that serve the location: Fire Department: Sawn Coar Fig. Fig. Fax: 812 - 579. 540 Health Department: BARTHOLONELL CO. Fax: 812 - 379 - 1040 Child Protection Service: NIN Tax: N/A For further information regarding this methamphetamine laboratory, contact Investigating Officer: Nactol A. NEKD Phone 812.522.1441 This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing. This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.